

BEST AVAILABLE COPY

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/572811

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.		↓	13	↓		↓
TOTAL DEP.	↑	↑	6	↑	↑	↑
TOTAL CLAIMS		↓	19	↓	↓	↓

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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S49						
S50						
TOTAL IND.		↓			↓	
TOTAL DEP.	↑	↑			↑	↑
TOTAL CLAIMS		↓			↓	↓